

**Transitioning to Adulthood;
Transition in the IEP**

Parents Helping Parents
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What do I need to know about
PARENTS HELPING PARENTS?

- This is your Parent Training and Information & Family Resource center

All about PHP

- Library
- Family & Community Resources
- Education Department
- iTech; Assistive Technology
- Support Groups

Training Overview

- Transition planning
- Transition Assessment
- Transition post-secondary goals
- Annual transition goals
- Transition services
- Questions about transition

The 2004 Congressional Findings:


"Almost 30 years of research and experience has demonstrated that the education of children with disabilities can be made more effective by -

- (A) having high expectations for such children and **ensuring their access to the general education curriculum in the regular classroom**, to the maximum extent possible, in order to -
- (i) meet developmental goals and, to the extent possible, the challenging expectations that have been established for all children; and
- (ii) be prepared to lead productive and independent lives **to the maximum extent possible** (20 U.S.C. Sec. 1401 (c)(5))

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Why Transition Planning?
A Vision for the Future

- Take a few minutes to envision your hopes and fears about your child transitioning out of school (or for students, for yourself!)
- What words describe the outcomes you envision?
- What are the outcomes right now?



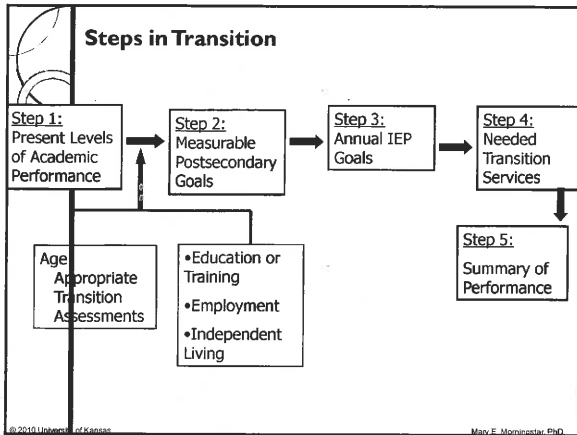
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No later than the first IEP in effect when the student turns 16 and annually thereafter...

A student's IEP **must** include **appropriate measurable postsecondary goals** based upon **age appropriate transition assessments** related to training, education, employment, and where appropriate, independent living skills.

The IEP must include those **transition services (including courses of study)** needed to assist the student in reaching postsecondary goals.

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What are Transition Services?

"a coordinated set of activities for a student that –

(A) is designed to be within a results-oriented process that is focused on improving the academic and functional achievement of the child with a disability to facilitate the child's movement from school to post-school activities, including post-secondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation."

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More on Transition Services

(B) based on the individual child's needs, taking into account the **child's strengths, preferences, and interests**; and

(C) includes **instruction, related services, community experiences, the development of employment and other post-school adult living objectives**, and when appropriate, acquisition of daily living skills and functional vocational evaluation. (Section 602, (34).

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Self Determination

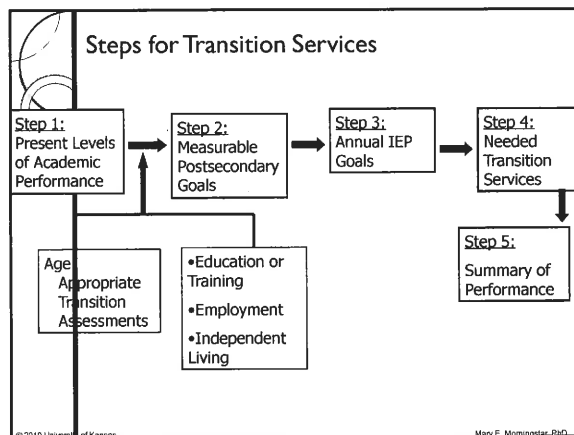
- Method of engaging students in their education (beyond the IEP planning)
- Lifelong skills for variety of environments
- Self-Awareness
- Preparing students for adult environment
 - Entitlement programs vs. Eligibility programs (special education) (adult services)

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IDEA Requirements *Impacting* Student Involvement in Transition

- Student is invited to meeting
 - For the IEP to be in place when the student turns 16
 - Student participation and leadership on the IEP team is exemplary practice
- Transition Assessments
 - to identify student interests, needs, preferences, strengths
- Creating Postsecondary Goals
 - generated from results of transition assessment
 - written in first person (*I will... OR Tonya will...*)

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Defining Transition Assessment

Division of Career Development & Transition

Transition assessment is "the ongoing process of collecting data on the individual's strengths, needs, preferences, and interests as they relate to the demands of current and future working, educational, living, and personal, and social environments. Assessment data serve as the common thread in the transition process and form the basis for defining goals and services to be included in the IEP" (Sitlington, 1996).

**Transition Assessment:
Where Does it Start?**

- Planning for Assessment;
- Assessment Plan characteristics
- What will be assessed?
- How will your child be assessed?

Standardized
Norm-referenced and/or Criterion-referenced

Informal
Analysis of background info.
Observations & situational assessments
Interviews
Alternative assessments
Work samples
Curriculum-based assessments
Person-centered Planning

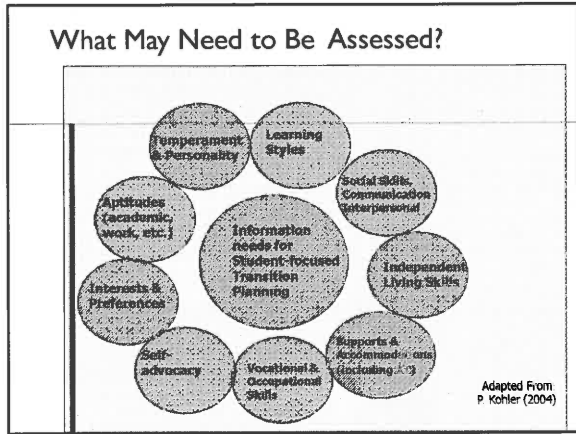
**Guiding Questions Transition
Assessment Planning**

- What do they already know about your child's strengths, preferences & needs in employment, education, living?
- What do they **need to know** about your child's employment, education and living strengths, preferences & needs?
- What methods and sources will provide the information the IEP Team needs?
- Who will gather the information & What role will your child play in the assessment process?
- When will the assessment data be collected and used for transition planning?
- Is your child making progress toward his/her specific postsecondary goals (employment, education, living)?

Assessment Plan Characteristics:

'Customized' to the specific types of information needed about your child

1. Appropriate to learning and response characteristics
2. Use of assistive technology & accommodations
3. Include multiple ongoing activities to sample behaviors and skills
4. Must be verified by multiple methods & persons
5. Results maintained
6. Occurs over time (multiple years)



How is the Assessment done?

Standardized

- Major elements of the assessment are consistent (test items, scoring, interpretation)
- Norm-referenced
- Criterion-referenced

Informal Assessment?

- Analysis of background information
- Interviews
- Surveys
- Checklists
- Rating Scales
- Work samples
- Curriculum-based assessments
- Interest Inventories
- Observations & situational assessments
- Person-centered Planning

Assessing Environments

E-Jam: The Environmental Job Assessment Measure

Vocational Integration Index

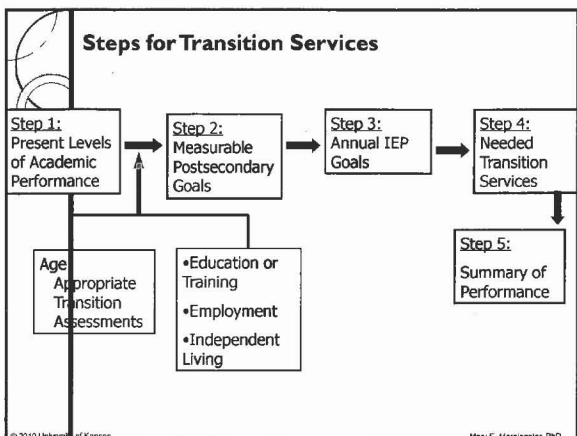
Ecological Inventories

Postsecondary Supports Survey


Opening Doors:

Planning for Life After High School

<http://dpi.wi.gov/sped/pdf/tranopndrs.pdf>



Members of Transition Planning IEP Meetings



- Family Members
- Student
- Education personnel
- School support staff
- Community members
- Peers and friends
- Administrators
- Postsecondary Ed. staff
- Community Service Providers

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What do “Measurable Postsecondary Goals” Mean?

- Post school Goals stated so that we can **measure the extent** to which the goals were **achieved & schools role in planning**
- Education/training & employment are **required** Independent living **as needed**
- Include **Time element**

Formula:
After high school; or After graduation,
Student will
behavior (what, where and how?)

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Measurable Postsecondary Goals

A postsecondary goal is “generally understood to refer to those goals that a child hopes to achieve after leaving secondary school (i.e., high school)”

A postsecondary goal is not the process of pursuing the goal....
It is the desired outcome

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What do "Measurable Postsecondary Goals" Mean?

Examples (from NSTTAC):
Upon completion of high school...

- I will enroll in the Associates Degree program at De Anza Community College in August of 2015. (*separate, education/training*)
- I will get my undergraduate degree in history and education, to become a high school social studies teacher. (*combo: education/training & employment*)
- Paul will independently prepare for work each day by dressing, making his bed, making his lunch, and accessing transportation. (*separate, independent living*)

For younger students....

- I will work with animals
- I will go to school to learn about computers
- I will live in my own apartment with a roommate

Courses of Study

- "multi-year description of coursework to achieve a student's desired postschool goals"
- "meaningful to the student's future and motivate the student to complete his or her education"
- "attention on how the child's educational program can be planned to help the child make a successful transition to his or her goals for life after secondary school"

What are Annual IEP Goals that Support Postsecondary Goals?

- Does the student know what her post-school goals are for education or training?
- Can the student explain her disability and support/accommodation needs?
- Does student enjoy classroom learning? Or is he more hands on?
- Does the student know that college is an option?
- What are the current options as far as college?

Transition IEP Goals are SMART
 From: [http://en.wikipedia.org/wiki/SMART_\(project_management\)](http://en.wikipedia.org/wiki/SMART_(project_management))

Annual goals: "statements that describe what a child with a disability can reasonably be expected to accomplish (e.g., master some skill or knowledge [not an activity]) within a twelve month period in the child's special education program." http://www.calstat.org/iep/6_reading.shtml

- **Specific** (Who? What? Where?)
- **Measurable** (How will goal be measured?)
- **Action-Oriented** (Action words to describe what?)
- **Realistic & Relevant** (Will they be able to achieve it?)
- **Time-bound** (For tracking & monitoring)

Transition Services & course of study

- Transition services must be based upon your child's needs, strengths, preferences and interests and focus on the desired postsecondary goals for your child
- The transition services that must be considered by the IEP team during the planning process include:
 - Instruction,
 - Community experiences,
 - Related services,
 - The development of employment and other post-school adult living objectives,
 - And when appropriate, acquisition of daily living skills and functional vocational evaluations.

Examples of Transition Services

Instruction

- Enroll in community education or recreation programs of interest
- Complete a study skills training class
- Participate in a career awareness program or class

Community Experiences

- Learn about the Americans with Disabilities Act & Section 504
- Take classes through the local 4_H
- Volunteer opportunities in areas of high interest
- Tour postsecondary training programs

Related Services

- Identify and visit community mental health agencies
- Learn to use a guide dog effectively
- Obtain a mentor through an agency providing substance abuse counseling
- Learn to use augmentative communication device in work setting

Examples of Transition Services

Employment

- Interview adult worker in a career field of interest
- Practice completing job applications and interviewing skills
- Research three different careers and write a paper about them
- Job shadow in areas of high interest

Acquisition of Daily Living Skills

- Learn about time management
- Take a CPR/First Aid course
- Develop a monthly living budget

Other Post-School Adult Living Objectives

- Learn about community agencies that provide services and support to people with disabilities
- Contact Center for Independent Living for independent living skills classes
- Inquire into programs such as food stamps, medical insurance, etc.
- Apply for Dept. of Rehabilitation DOR services

Functional Vocational Evaluation

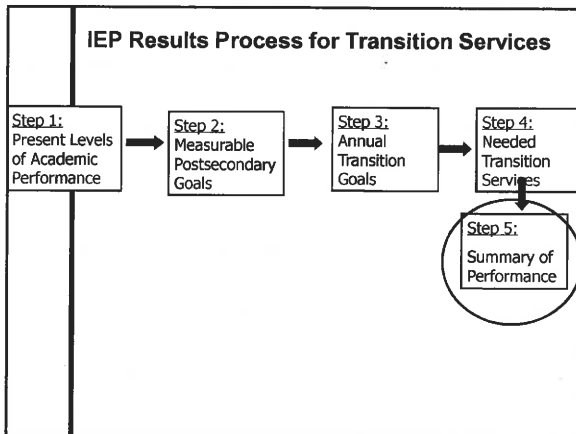
- Participate in a situational vocational assessment
- Participate in job samples in the community
- Conduct formal aptitude tests

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One year before the student reaches the legal age of majority:

- Beginning **not later than one year before** the student reaches the age of majority under State law... students and parents are to be **notified of the specific rights** which will transfer to the student once he or she turns 18 & documentation must be found in the IEP.
- Documentation of this notification must be included in the IEP at this time.
 - Notification of meetings
 - Notification and consent for evaluation
 - Selection of participants of IEP meetings
 - Approval of the contents of the IEP
 - Approval regarding change of placement

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For a student whose eligibility terminates due to graduation from secondary school or exceeding the age eligibility for a free appropriate education under State law:

- (i) a member of the student's IEP Team ... shall provide the student with a written Performance Summary;
- (ii) ... be based on a **historical review** of functional assessment and evaluation data as well as an **interpretation** of the effectiveness of **accommodations and supports**;
- (iii) ... specify information and data that **documents the student's disability**; provide information on the **nature and extent of academic and functional limitations caused by the disability**; and provide information on the **effectiveness of accommodations, supports and assistive technology** previously used to reduce the functional impact of the disability.
- (iv) the Performance Summary should include, whenever possible:
 - (a) the most **recent evaluations or data** that support the narrative above; and (b) **student input** regarding the functional limitations of her/his disability and use and effectiveness of accommodations and supports.

SOPs on TC site

Who is Responsible for Transition Outcomes?

In the case where a participating agency, other than the educational agency, fails to provide agreed upon services, the educational agency shall reconvene the IEP team to identify alternative strategies to meet the transition objective

Questions? Discussion

- The scanned handouts will be emailed to you
- Resources and Links related to the training will also be sent
- Please consider checking out library materials related to Transition
- Parent involvement in the transition process is very important!

SANTA CLARA COUNTY ASSESSMENT PLAN

Initial Annual Triennial Transition Interim Other _____

To Parent or Guardian of _____ Date ____ / ____ / ____

District _____ School _____ Grade _____ Birthdate ____ / ____ / ____

Native language _____ English proficiency/CELDLT Level _____

The reason for the referral for assessment is: _____

The district proposes to assess your child to determine his/her eligibility for special education services or continued eligibility and present levels of academic performance and functional achievement. Your child will be assessed in all areas of suspected disability as needed. To meet your child's individual education needs, this assessment will consist of an evaluation in only the areas checked by the local educational agency (LEA/district). *Tests conducted pursuant to these assessments may include, but are not limited to classroom observations, rating scales, one-on-one testing or some other types or combination of tests.

Evaluation Area	Examiner Title
<input type="checkbox"/> Academic Achievement – These tests measure reading, spelling, arithmetic, oral and written language skills, and/or general knowledge.	
<input type="checkbox"/> Health – Health information and testing is gathered to determine how your child's health affects school performance.	
<input type="checkbox"/> Intellectual Development – These tests measure how well your child thinks, remembers, and solves problems.	
<input type="checkbox"/> Language/Speech Communication Development – These tests measure your child's ability to understand and use language and speak clearly and appropriately.	
<input type="checkbox"/> Motor Development – These tests measure how well your child coordinates body movements in small and large muscle activities. Perceptual skills may also be measured.	
<input type="checkbox"/> Social/Emotional – These scales will indicate how your child feels about him/herself, gets along with others, and takes care of personal needs at home, school and in the community.	
<input type="checkbox"/> Adaptive/Behavior – These scales indicate how your child takes care of personal needs at home, school and in the community.	
<input type="checkbox"/> Post Secondary Transition – Age appropriate transition assessments related to training, education, employment and where appropriate independent living skills.	
<input type="checkbox"/> Other _____	
<input type="checkbox"/> Alternative Means of Assessment – Describe alternative methods of assessing the child, if applicable _____	

- I consent to the assessment. I understand that the results will be kept confidential and that I will be invited to attend the IEP team meeting to discuss the results. I also understand that no special education services will be provided to my child without my written consent.
- I do not consent to the proposed assessment described above.
- I would like the following assessment information to be considered by the IEP team: _____
- If my child is or may become eligible for public benefits (Medi-Cal): I authorize the LEA/district to release student information for the limited purpose of billing Medi-Cal/Medicaid and to access Medi-Cal health insurance benefits for applicable services.

Signature _____

Parent Guardian Surrogate Adult Student

- Parent / Guardian / Student has received written notification of protections available to parents when LEA requests to access Medi-Cal health insurance benefits.

Note: Attach Procedural Safeguards & Medi-Cal Protections

Date Received by District/ LEA: ____ / ____ / ____

SANTA CLARA COUNTY ANNUAL GOALS

Name _____

IEP Date ___/___/___

Area of Need: Baseline:	Measurable Annual Goal # ___ <input type="checkbox"/> Enables student to be involved/progress in general curriculum/state standard <input type="checkbox"/> Addresses other educational needs resulting from the disability <input type="checkbox"/> Linguistically appropriate* <input type="checkbox"/> Secondary Transition Goal: <input type="checkbox"/> Education/Training <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Person(s) Responsible _____		
Progress Report 1: ___/___/___ Summary of progress _____ _____ _____ Comment _____ _____ _____	Progress Report 2: ___/___/___ Summary of progress _____ _____ _____ Comment _____ _____ _____	Progress Report 3: ___/___/___ Summary of progress _____ _____ _____ Comment _____ _____ _____	Goal: Annual Review Date: ___/___/___ Goal met <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:
Area of Need: Baseline:	Measurable Annual Goal: # ___ <input type="checkbox"/> Enables student to be involved/progress in general curriculum/state standard <input type="checkbox"/> Addresses other educational needs resulting from the disability <input type="checkbox"/> Linguistically appropriate* <input type="checkbox"/> Secondary Transition Goal: <input type="checkbox"/> Education/Training <input type="checkbox"/> Employment <input type="checkbox"/> Independent Living Person(s) Responsible _____		
Progress Report 1: ___/___/___ Summary of progress _____ _____ _____ Comment _____ _____ _____	Progress Report 2: ___/___/___ Summary of progress _____ _____ _____ Comment _____ _____ _____	Progress Report 3: ___/___/___ Summary of progress _____ _____ _____ Comment _____ _____ _____	Goal: Annual Review Date: ___/___/___ Goal met <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:

NOTE: If English learner, one of the goals must address English language development.

SANTA CLARA COUNTY INDIVIDUAL TRANSITION PLAN

Name _____ Birth Date: ____/____/____ IEP Date ____/____/____

If appropriate, and agreed upon, Describe how the student participated in the process:
 Student Invited: Yes No agencies invited: Yes No Present at meeting Interview Prior
 Not applicable Interest Inventories Questionnaire

Age-appropriate transition assessments/instruments were used. Yes No Describe the results of the assessments:

Student's Post Secondary Goal: Training or Education (Required):	
Upon completion of school I will _____ Linked to Annual Goal # _____ Person/Agency Responsible: _____	Transition Service Code (Required): Activities to Support Transition Service: Community Experiences as Appropriate: Related Services as Appropriate:

Student's Post Secondary Goal Employment (Required)	
Upon completion of school I will _____ Linked to Annual Goal # _____ Person/Agency Responsible: _____	Transition Service Code (Required): Activities to Support Transition Service: Community Experiences as Appropriate: Related Services as Appropriate:

Student's Post Secondary Goal Independent Living (As appropriate):	
Upon completion of school I will _____ Linked to Annual Goal # _____ Person/Agency Responsible: _____	Transition Service Code (As Appropriate): Activities to Support Transition Service: Community Experiences as Appropriate: Related Services as Appropriate:

SANTA CLARA COUNTY
INDIVIDUAL TRANSITION PLAN

Name _____ Birth Date: ____ / ____ / ____ IEP Date ____ / ____ / ____

District Graduation Requirements:

Course of Study

A multi-year description of student's coursework from current year to anticipated exit year, in order to enable the student to meet their post secondary goal.

Units/Credits
Completed: _____

Units/Credits
Pending: _____

Student's Course of Study Leads to (Select One Option Below)

Certificate of Completion or Diploma

Anticipated Completion Date: ____ / ____ / ____

CAHSEE (High School Exit Exam)

CAHSEE/ELA date: ____ / ____ / ____ Score: _____ Passed Did not pass

CAHSEE/Math date: ____ / ____ / ____ Score: _____ Passed Did not pass

CAHSEE: _____

Age of Majority:

On or before the student's 17th birthday, he/she has been advised of rights at age of majority (age 18)

By whom: _____ Date: ____ / ____ / ____

When you reach the age of 18, the age of majority, you have the right to receive all information about your educational program and make all decisions related to your education. This includes the right to represent yourself at an IEP meeting and sign the IEP in place of your parent or guardian.

1. The student's IEP includes appropriate measurable postsecondary goal or goals that covers the education or training, employment, and as needed independent living? Yes No
2. Is (are) the postsecondary goal(s) updated annually? Yes No
3. Is there evidence that the measurable postsecondary goal(s) were based on age appropriate transition assessment? Yes No
4. Are there transition services in the IEP that will reasonably enable the student to meet his or her postsecondary goal(s)? Yes No
5. Do the transition services include courses of study that will reasonably enable the student to meet his or her postsecondary goal(s)? Yes No
6. Is (are) there annual IEP goal(s) related to the student's transition services needs? Yes No
7. Is there evidence that the student was invited to the IEP meeting where transition services were discussed? Yes No
8. If appropriate, is there evidence that a representative of any participating agency was invited to the IEP Team meeting with the prior consent of the parent or student who has reached the age of majority? Yes No N/A

Summary Of The Student's Academic Achievement And Functional Performance

Student's Name _____

Date of Summary ____/____/____

Reason for Exit (check the one that applies):

- Graduated per District's requirements/policy, and completion of California High School Exit Examination (CAHSEE) if applicable, earning a regular high school diploma
- Reached age 22 and earned Certificate of Achievement or Certificate of Completion and is no longer eligible for special education
- Received a Certificate of Achievement/Completion

SUMMARY OF THE STUDENT'S ACADEMIC ACHIEVEMENT AND FUNCTIONAL PERFORMANCE

Strengths/Interests/Learning Preferences:	
Pre-Academic / Academic / Functional Skills (Note results of any general State or district-wide assessments): <input type="checkbox"/> This is not an area of suspected disability at this time. <input type="checkbox"/> Currently, student is performing within age appropriate range. <input type="checkbox"/> Other, explain:	
Cognitive Abilities: <input type="checkbox"/> This is not an area of suspected disability at this time. <input type="checkbox"/> Currently, student is performing within age appropriate range. <input type="checkbox"/> Other, explain:	
Communication Skills: <input type="checkbox"/> This is not an area of suspected disability at this time. <input type="checkbox"/> Currently, student is performing within age appropriate range. <input type="checkbox"/> Other, explain:	
Motor Skills (Fine/Gross): <input type="checkbox"/> This is not an area of suspected disability at this time. <input type="checkbox"/> Currently, student is performing within age appropriate range. <input type="checkbox"/> Other, explain:	
Health: <input type="checkbox"/> This is not an area of suspected disability at this time. <input type="checkbox"/> No health concerns evident at this time. <input type="checkbox"/> Other, explain:	
Social/Emotional/Behavioral: <input type="checkbox"/> This is not an area of suspected disability at this time. <input type="checkbox"/> Currently, student is performing within age appropriate range. <input type="checkbox"/> Other, explain:	
Self Help/Adaptive: <input type="checkbox"/> This is not an area of suspected disability at this time. <input type="checkbox"/> Currently, student is performing within age appropriate skill range. <input type="checkbox"/> Other, explain:	
Pre-Vocational/Vocational: <input type="checkbox"/> This is not an area of suspected disability at this time. <input type="checkbox"/> Currently, student is performing within age appropriate range. <input type="checkbox"/> Other, explain:	
Agency Linkages (check agencies known to be working with the individual or could be a resource to the individual)	Agency Contact Person and phone number, if known
<input type="checkbox"/> San Andreas Regional Center (SARC)	
<input type="checkbox"/> California Children's Services (CCS)	
<input type="checkbox"/> Santa Clara County Department of Health and Human Services	
<input type="checkbox"/> Mental Health Services	
<input type="checkbox"/> Employment Development Department	
<input type="checkbox"/> California Department of Rehabilitation	
<input type="checkbox"/> Community College / University Disabled Student Services	
<input type="checkbox"/> Other	
Other Recommendations:	

Summary Of The Student's Academic Achievement And Functional Performance

Student's Name _____

Date of Summary ____/____/____

(These accommodations have been documented on IEP)

Recommendations Of Accommodations, Supports And Resources Continued:

<p>Related To Support:</p> <p>____ Check for understanding</p> <p>____ Instructions/directions repeated/rephrased</p> <p>____ Present one task at a time</p> <p>____ Preferential/assigned seating; explain: _____</p> <p>____ Use of assignment notebook or planner</p> <p>____ Provided with progress reports</p> <p>____ Supervision during unstructured time</p> <p>____ Cues/prompts/reminders of rules / procedures</p> <p>____ Offer choices</p> <p>____ Note taking assistance</p> <p>____ Access to computer on campus</p> <p>____ Use of a scribe/word processing</p> <p>____ Use of a calculator</p> <p>____ Peer tutor/ staff assistance in _____</p> <p>____ Prior Behavior Support Plan (BSP)</p> <p>____ Home/job/school communication system; explain: _____</p> <p>____ Other: _____</p> <p>____</p> <p>____</p> <p>Related to Health Concerns:</p> <p>____ Reminder to take medication(s)</p> <p>____ Medication(s) given under supervision</p> <p>____ Other: _____</p> <p>Presentation of Materials & Instructions</p> <p>____ Books on tape and/or CD</p> <p>____ Assignments/tests modified to address identified needs of learning styles: _____</p> <p>____ Large print</p> <p>____ Closed caption</p> <p>____ English language development materials</p> <p>____ Manipulative/study aids for _____</p> <p>____ Test questions/assignments- given orally</p> <p>____ Tests/assignments directions- read orally</p> <p>____ Tests/assignments- shorten</p> <p>____ Questions on tests/assignments rephrased</p> <p>____ Preview of tests/assignments</p> <p>____ Tests/assignments given in smaller parts</p> <p>____ Visual aids: flash cards, maps, posters, clues, etc.</p> <p>____ Other; explain: _____</p>	<p>Response to Materials & Instruction</p> <p>____ Reduced/shortened tests/assignments/tasks: _____</p> <p>____ Extended time on in-class assignments/tests: _____</p> <p>____ Use of notes for tests/assignments</p> <p>____ Open book for tests/assignments</p> <p>____ Spelling errors will not impact grade when no opportunity for editing assistance and/or spell-check is available</p> <p>____ Special projects or alternate assignments in lieu of assignments given to non-disabled peers</p> <p>____ Use of a calculator</p> <p>____ Proof-reader and redo assignment or writing mechanics not graded</p> <p>____ Other: _____</p> <p>Settings:</p> <p>____ Access to study carrel for task/assignments/tests</p> <p>____ Free from visual distractions</p> <p>____ Quiet environment – free from excessive noise</p> <p>____ In a small group environment</p> <p>____ Other: _____</p> <p>Timing/Scheduling of Tasks/Assignments/tests:</p> <p>____ Extended time(s): _____ minutes for every _____ minutes given to non-disabled peers</p> <p>____ Tests/assignments given in shortened time segments</p> <p>____ Extended time on in-class assignments/tests: _____</p> <p>____ Other: _____</p> <p>For Additional Information such as however not limited to; last cognitive assessment results (psycho-educational report), academic/functional assessment results, Individual Educational Program Packet, or other k-12 schooling documentation contact:</p> <p>Name of School District: _____</p> <p>School District's Phone number: _____</p> <p>Title of Contact Person: _____</p> <p>Best if contact is made no later than ____/____/____</p>
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**Santa Clara County SELPA's I, II, III, IV, VII
CASEMIS POSTSECONDARY FOLLOW-UP**

Name (from CASEMIS): _____

Address (from CASEMIS): _____

CASIS ID# (from CASEMIS): _____

The State of California requires that we follow up on you one year after graduating or leaving public school. Please respond to the following questions, and return this form in the enclosed envelope.

Thanks!

1. Are you participating in a postsecondary program? If yes, check all that apply:

- None
- Four-year college/university
- Community college
- Vocational or technical school (two year degree program)
- GED program
- Vocational or technical school (Certificated program)
- Regional Occupational programs (ROP) Classes
- Work Force Investment Act (WIA) supported program
- Non-WorkAbility Employment Program
- Adult Training Program
- Military Training
- Incarcerated

2. Are you currently employed? (unsubsidized)

- Yes No Not applicable

**PLEASE RETURN THIS FORM TO THE ATTENTION OF THE SPECIAL
EDUCATION DIRECTOR OF _____ SCHOOL DISTRICT.**

**PRIOR WRITTEN NOTICE OF PROPOSED ACTION
GRADUATION FROM HIGH SCHOOL
(SAMPLE LETTER)**

Date: ___/___/___

Dear Parent and Student,

Congratulations! This letter serves as written notice that _____ is currently meeting the requirements for graduation with a regular high school diploma. As _____ is receiving special education and related services, pursuant to Federal law the District must notify you of this proposed change in placement. Your child's graduation with a regular diploma is based on his/her meeting both the State of California and School District's requirements for graduation with a regular high school diploma. As your child is currently on track to satisfy those requirements, graduation is the only valid option. Upon his or her graduation, your child will no longer be eligible for special education services. It is the District's determination that any other option, such as retention or a certificate of completion, is not appropriate for _____ at this time. Upon request, an IEP meeting may be convened to discuss this recommendation

The following information was used in making this decision:

- | | | | |
|--------------------------|---------------------|--------------------------|------------------------------------|
| <input type="checkbox"/> | IEP | <input type="checkbox"/> | Evaluation |
| <input type="checkbox"/> | Student Performance | <input type="checkbox"/> | Teacher/Information/Observation |
| <input type="checkbox"/> | Student Behavior | <input type="checkbox"/> | Report Cards/ Statewide Assessment |
| <input type="checkbox"/> | Parent Information | <input type="checkbox"/> | Other: _____ |

Please be advised that you are entitled to procedural safeguards if you disagree with this determination. Please feel free to contact your child's school counselor if you have any questions about this matter or, if you require assistance in understanding any portion of this notice.

Sincerely,

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Impact

Assistive Technology and Transition Planning

By Thomas J. Nurse

These are exciting times in which we live. The opportunities to use assistive technology as a tool to support the activities of youth and adults with disabilities have never been better. When assistive technology is combined with transition planning, the scope of opportunities for achieving life goals broadens greatly.

Assistive technology

refers to “any item, piece of equipment, or product system that is used to increase, maintain, or improve functioning of individuals with disabilities”; it can be as simple as a pencil grip or complex as a touch-screen computer (Family Center on Technology and Disability, 2006a). This brief article offers some ideas, resources, and things to consider related to assistive technology and transition. This is a topic of particular passion for me as a parent of a wonderful 14-year-old daughter, Shelby, who has cerebral palsy and utilizes assistive technology every day. Shelby’s assistive technology success story was recently highlighted in an article posted on the Family Center for Technology and Disability Web site (www.ftcd.info/).

Start Early, But it’s Never Too Late

As a child learns new skills, those skills build the foundation for acquiring related higher-level skills. For a child with a disability, development may be slower, requiring more time, more repetition and a willingness to learn other ways to be successful, including utilizing assistive technology. For example being able to answer a yes-or-no question is the start to being able to engage in conversation, yet if a disability creates a barrier to communication then assistive technology may be a valuable tool to help make communication possible.

By law, a student’s assistive technology needs must be considered in development of their individualized education program (IEP); it may be referred to as “assistive technology” in some IEPs, while in others it may be “accommodations, supports, program modifications or supplementary aids and services” (Family Center on Technology and Disability, 2006b).

Under IDEA 2004, transition planning must start no later than the first IEP to be in effect when the child turns 16. However, in reality earlier is often better. IDEA 2004 also states that a Transition IEP broadens formally to “a results- oriented process, that is focused on improving the academic and functional achievement of the child with a disability to facilitate the child’s movement from school to

post-school activities...” (National Dissemination Center for Children with Disabilities, 2005). Assistive technology needs should be included as part of the discussion to determine if a Transition IEP may be needed earlier than age 16, as well as included in the IEP itself.

Think Across Settings

Children and youth learn in all their environments, not just in school. Therefore, it’s critical to consider utilizing assistive technology in all the child’s environments including, home, school, and in the community. For example, independent living skills include tasks such as turning on lights, calling for assistance, changing the TV channel or talking on the phone. Typically these are more frequently part of home life, not the school day. However, often the expertise on how assistive technology could be utilized to develop these skills exists with the school-based assistive technology professionals. Successfully combining assistive technology considerations in all the child’s environments requires communication between the family and school, which allows everyone to share their perspectives and expertise.

Let’s Get Started

The steps below do not always occur in the same order and sometimes you have to go back and try again. But, they provide a starting point for evaluating how assistive technology can benefit a child in school and beyond into adult life:

- Establish an understanding of the child’s present level of academic performance by utilizing your state’s standardized grade level student expectations to identify both areas of strength and where additional assistance may be needed.
- Establish an understanding of the child’s present level of functional performance by utilizing a tool such as the *WATI Assistive Technology and Transition* forms (www.wati.org/products/freematerials.html).
- Develop a written vision of life after high school in a detailed post-school outcome statement. This statement can help the Transition IEP team identify needed supports and services.
- Consider whether assistive technology can help achieve the outcomes.
- Identify who’s going to do what in acquiring the technology, providing training in its use if needed, and funding it. Also determine whether the funding source will allow the technology to go with the student into post-high school education and work.

Finally, as the old saying goes, “The harder you work, the luckier you’ll get.” Good luck.

References

Family Center on Technology and Disability (2006a). *Assistive technology glossary*. Retrieved 4/22/06 from www.fctd.info/resources/index.php.

Family Center on Technology and Disability (2006b). *Assistive technology and the IEP*. Retrieved 4/22/06 from www.fctd.info/resources/AT_IEP.php.